

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Accusation
Against:**

WILLIAM LEE MATZNER, M.D.

Case No. 800-2015-012071

**Physician's and Surgeon's
Certificate No. A43053**

Respondent

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 30, 2018.

IT IS SO ORDERED: October 31, 2018.

MEDICAL BOARD OF CALIFORNIA



Kristina Lawson, JD, Chair
Panel B

1 XAVIER BECERRA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 VLADIMIR SHALKEVICH
Deputy Attorney General
4 State Bar No. 173955
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6538
6 Facsimile: (213) 897-9395
Attorneys for Complainant

7
8 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
9 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

10 In the Matter of the Accusation Against:

11 WILLIAM LEE MATZNER, M.D.
12 PO BOX 941570
13 SIMI VALLEY, CA
93094

14 Physician's and Surgeon's Certificate No. A
15 43053,

16 Respondent.

Case No. 800-2015-012071

OAH No. 2018010987

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

17
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
19 entitled proceedings that the following matters are true:

20 PARTIES

21 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
22 of California (Board). She brought this action solely in her official capacity and is represented in
23 this matter by Xavier Becerra, Attorney General of the State of California, by Vladimir
24 Shalkevich, Deputy Attorney General.

25 2. Respondent William Lee Matzner, M.D. (Respondent) is represented in this
26 proceeding by attorney Gregory D. Werre, whose address is: Reback, McAndrews & Blessey,
27 LLP, 1230 Rosecrans Avenue, Suite 450, Manhattan Beach, California 90266.
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3. On or about August 25, 1986, the Board issued Physician's and Surgeon's Certificate No. A 43053 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2015-012071, and will expire on December 31, 2019, unless renewed.

JURISDICTION

4. Accusation No. 800-2015-012071 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on January 3, 2018. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2015-012071 is attached as exhibit A and incorporated herein by reference.

6. It is the intent of the parties that in addition to the pending Accusation, this Stipulated Settlement includes resolution of all currently pending investigations of Respondent, including Medical Board case numbers 800-2017-035337 and 800-2017-038363.

ADVISEMENT AND WAIVERS

7. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2015-012071. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

8. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

9. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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1 CULPABILITY

2 10. Respondent admits the truth of each and every charge and allegation in Accusation
3 No. 800-2015-012071.

4 11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
5 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
6 Disciplinary Order below.

7 CONTINGENCY

8 12. This stipulation shall be subject to approval by the Medical Board of California.
9 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
10 Board of California may communicate directly with the Board regarding this stipulation and
11 settlement, without notice to or participation by Respondent or his counsel. By signing the
12 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
13 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
14 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
15 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
16 action between the parties, and the Board shall not be disqualified from further action by having
17 considered this matter.

18 13. The parties understand and agree that Portable Document Format (PDF) and facsimile
19 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
20 signatures thereto, shall have the same force and effect as the originals.

21 14. In consideration of the foregoing admissions and stipulations, the parties agree that
22 the Board may, without further notice or formal proceeding, issue and enter the following
23 Disciplinary Order:

24 DISCIPLINARY ORDER

25 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 43053 issued
26 to Respondent William Lee Matzner, M.D. is revoked. However, the revocation is stayed and
27 Respondent is placed on probation for seven (7) years on the following terms and conditions.

28 1. ACTUAL SUSPENSION. As part of probation, Respondent is suspended from the

1 practice of medicine for 30 days, beginning the sixteenth (16th) day after the effective date of the
2 decision.

3 2. CONTROLLED SUBSTANCES - TOTAL RESTRICTION. Respondent shall not
4 order, prescribe, dispense, administer, furnish, or possess any controlled substances as defined in
5 the California Uniform Controlled Substances Act.

6 Respondent shall not issue an oral or written recommendation or approval to a patient or a
7 patient's primary caregiver for the possession or cultivation of marijuana for the personal medical
8 purposes of the patient within the meaning of Health and Safety Code section 11362.5.

9 If Respondent forms the medical opinion, after an appropriate prior examination and a
10 medical indication, that a patient's medical condition may benefit from the use of marijuana,
11 Respondent shall so inform the patient and shall refer the patient to another physician who,
12 following an appropriate prior examination and a medical indication, may independently issue a
13 medically appropriate recommendation or approval for the possession or cultivation of marijuana
14 for the personal medical purposes of the patient within the meaning of Health and Safety Code
15 section 11362.5. In addition, Respondent shall inform the patient or the patient's primary
16 caregiver that Respondent is prohibited from issuing a recommendation or approval for the
17 possession or cultivation of marijuana for the personal medical purposes of the patient and that
18 the patient or the patient's primary caregiver may not rely on Respondent's statements to legally
19 possess or cultivate marijuana for the personal medical purposes of the patient. Respondent shall
20 fully document in the patient's chart that the patient or the patient's primary caregiver was so
21 informed. Nothing in this condition prohibits Respondent from providing the patient or the
22 patient's primary caregiver information about the possible medical benefits resulting from the use
23 of marijuana.

24 3. CONTROLLED SUBSTANCES - SURRENDER OF DEA PERMIT. Respondent is
25 prohibited from practicing medicine until Respondent provides documentary proof to the Board
26 or its designee that Respondent's DEA permit has been surrendered to the Drug Enforcement
27 Administration for cancellation, together with any state prescription forms and all controlled

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1 substances order forms. Thereafter, Respondent shall not reapply for a new DEA permit without
2 the prior written consent of the Board or its designee.

3 4. COMMUNITY SERVICE. Within 60 calendar days of the effective date of this
4 Decision, Respondent shall submit to the Board or its designee for prior approval a community
5 service plan in which Respondent shall, during each year of probation, provide 100 hours of free
6 non-medical services to a community or non-profit organization. Community service performed
7 prior to the effective date of the Decision shall not be accepted in fulfillment of this condition.

8 5. PRESCRIBING PRACTICES COURSE. The parties intend that Respondent
9 complete a Prescribing Practices course shortly before completion of his probation. Prior to
10 completion of probation, or before petitioning for penalty relief, Respondent shall enroll in a
11 course in prescribing practices approved in advance by the Board or its designee. Respondent
12 shall provide the approved course provider with any information and documents that the approved
13 course provider may deem pertinent. Respondent shall enroll in the prescribing practices course
14 no sooner than 180 days prior to completion of his probation or submitting any application for
15 penalty relief to the Board. Respondent shall participate in and successfully complete the
16 classroom component of the course, and any other component of the course no sooner than 180
17 days prior to completion of Respondent's term of probation or submitting any application for
18 penalty relief to the Board. The prescribing practices course shall be at Respondent's expense and
19 shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
20 licensure.

21 Respondent shall submit a certification of successful completion to the Board or its
22 designee not later than 15 calendar days after successfully completing the prescribing practices
23 course. If Respondent does not complete the prescribing practices course by the end of his
24 probationary period or prior to seeking penalty relief, the period of probation shall be tolled until
25 such time as Respondent completes the prescribing practices course and submits a certification of
26 successful completion to the Board or its designee.

27 6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
28 the effective date of this Decision, Respondent shall enroll in a professionalism program, that

1 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.
2 Respondent shall participate in and successfully complete that program. Respondent shall
3 provide any information and documents that the program may deem pertinent. Respondent shall
4 successfully complete the classroom component of the program not later than six (6) months after
5 Respondent's initial enrollment, and the longitudinal component of the program not later than the
6 time specified by the program, but no later than one (1) year after attending the classroom
7 component. The professionalism program shall be at Respondent's expense and shall be in
8 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

9 A professionalism program taken after the acts that gave rise to the charges in the
10 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
11 or its designee, be accepted towards the fulfillment of this condition if the program would have
12 been approved by the Board or its designee had the program been taken after the effective date of
13 this Decision.

14 Respondent shall submit a certification of successful completion to the Board or its
15 designee not later than 15 calendar days after successfully completing the program or not later
16 than 15 calendar days after the effective date of the Decision, whichever is later.

17 7. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this
18 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice
19 monitor(s), the name and qualifications of one or more licensed physicians and surgeons whose
20 licenses are valid and in good standing, and who are preferably American Board of Medical
21 Specialties (ABMS) certified. A monitor shall have no prior or current business or personal
22 relationship with Respondent, or other relationship that could reasonably be expected to
23 compromise the ability of the monitor to render fair and unbiased reports to the Board, including
24 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree
25 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

26 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
27 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the
28 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed

1 statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role
2 of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees
3 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
4 signed statement for approval by the Board or its designee.

5 Within 60 calendar days of the effective date of this Decision, and continuing throughout
6 probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall
7 make all records available for immediate inspection and copying on the premises by the monitor
8 at all times during business hours and shall retain the records for the entire term of probation.

9 If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective
10 date of this Decision, Respondent shall receive a notification from the Board or its designee to
11 cease the practice of medicine within three (3) calendar days after being so notified. Respondent
12 shall cease the practice of medicine until a monitor is approved to provide monitoring
13 responsibility.

14 The monitor(s) shall submit a quarterly written report to the Board or its designee which
15 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
16 are within the standards of practice of medicine, and whether Respondent is practicing medicine
17 safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure
18 that the monitor submits the quarterly written reports to the Board or its designee within 10
19 calendar days after the end of the preceding quarter.

20 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
21 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
22 name and qualifications of a replacement monitor who will be assuming that responsibility within
23 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
24 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
25 notification from the Board or its designee to cease the practice of medicine within three (3)
26 calendar days after being so notified. Respondent shall cease the practice of medicine until a
27 replacement monitor is approved and assumes monitoring responsibility.

28 In lieu of a monitor, Respondent may participate in a professional enhancement program

1 approved in advance by the Board or its designee that includes, at minimum, quarterly chart
2 review, semi-annual practice assessment, and semi-annual review of professional growth and
3 education. Respondent shall participate in the professional enhancement program at Respondent's
4 expense during the term of probation.

5 8. SOLO PRACTICE PROHIBITION. Respondent may conduct utilization
6 reviews/chart reviews and may work in a laboratory setting, so long as such work does not
7 involve direct patient care. Respondent may perform such work as an independent consultant.

8 If at any point during the probationary period Respondent's work involves the provision of
9 direct patient care, from that time and through the remainder of his probation, he is to be
10 prohibited from engaging in the solo practice of medicine. Prohibited solo practice includes, but
11 is not limited to, a practice where: 1) Respondent merely shares office space with another
12 physician but is not affiliated for purposes of providing patient care, or 2) Respondent is the sole
13 physician practitioner at that location.

14 If Respondent fails to establish a practice with another physician or secure employment in
15 an appropriate practice setting prior to the first time he provides direct patient care, Respondent
16 shall receive a notification from the Board or its designee to cease the practice of medicine within
17 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
18 appropriate practice setting is established.

19 If, during the course of the probation, the Respondent's practice setting changes and the
20 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent
21 shall notify the Board or its designee within five (5) calendar days of the practice setting change.
22 If Respondent fails to establish a practice with another physician or secure employment in an
23 appropriate practice setting within 60 calendar days of the practice setting change, Respondent
24 shall receive a notification from the Board or its designee to cease the practice of medicine within
25 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
26 appropriate practice setting is established.

27 9. PROHIBITED PRACTICE. During probation, Respondent is prohibited from
28 practicing any form of pain management. After the effective date of this Decision, all patients

1 being treated by the Respondent shall be notified that the Respondent is prohibited from engaging
2 in pain management. Any new patients must be provided this notification at the time of their
3 initial appointment.

4 Respondent shall maintain a log of all patients to whom the required oral notification
5 was made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's
6 medical record number, if available; 3) the full name of the person making the notification; 4) the
7 date the notification was made; and 5) a description of the notification given. Respondent shall
8 keep this log in a separate file or ledger, in chronological order, shall make the log available for
9 immediate inspection and copying on the premises at all times during business hours by the Board
10 or its designee, and shall retain the log for the entire term of probation.

11 10. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
12 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
13 Chief Executive Officer at every hospital where privileges or membership are extended to
14 Respondent, at any other facility where Respondent engages in the practice of medicine,
15 including all physician and locum tenens registries or other similar agencies, and to the Chief
16 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
17 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
18 calendar days.

19 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

20 11. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
21 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
22 advanced practice nurses.

23 12. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
24 governing the practice of medicine in California and remain in full compliance with any court
25 ordered criminal probation, payments, and other orders.

26 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
27 under penalty of perjury on forms provided by the Board, stating whether there has been
28 compliance with all the conditions of probation.

1 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
2 of the preceding quarter.

3 14. GENERAL PROBATION REQUIREMENTS.

4 Compliance with Probation Unit

5 Respondent shall comply with the Board's probation unit.

6 Address Changes

7 Respondent shall, at all times, keep the Board informed of Respondent's business and
8 residence addresses, email address (if available), and telephone number. Changes of such
9 addresses shall be immediately communicated in writing to the Board or its designee. Under no
10 circumstances shall a post office box serve as an address of record, except as allowed by Business
11 and Professions Code section 2021(b).

12 Place of Practice

13 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
14 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
15 facility.

16 License Renewal

17 Respondent shall maintain a current and renewed California physician's and surgeon's
18 license.

19 Travel or Residence Outside California

20 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
21 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
22 (30) calendar days.

23 In the event Respondent should leave the State of California to reside or to practice,
24 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
25 departure and return.

26 15. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
27 available in person upon request for interviews either at Respondent's place of business or at the
28 probation unit office, with or without prior notice throughout the term of probation.

1 16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
2 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
3 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
4 defined as any period of time Respondent is not practicing medicine as defined in Business and
5 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
6 patient care, clinical activity or teaching, or other activity as approved by the Board. If
7 Respondent resides in California and is considered to be in non-practice, Respondent shall
8 comply with all terms and conditions of probation. All time spent in an intensive training
9 program which has been approved by the Board or its designee shall not be considered non-
10 practice and does not relieve Respondent from complying with all the terms and conditions of
11 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
12 on probation with the medical licensing authority of that state or jurisdiction shall not be
13 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
14 period of non-practice.

15 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
16 months, Respondent shall successfully complete the Federation of State Medical Boards' Special
17 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
18 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
19 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

20 Respondent's period of non-practice while on probation shall not exceed two (2) years.

21 Periods of non-practice will not apply to the reduction of the probationary term.

22 Periods of non-practice for a Respondent residing outside of California will relieve
23 Respondent of the responsibility to comply with the probationary terms and conditions with the
24 exception of this condition and the following terms and conditions of probation: Obey All Laws;
25 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
26 Controlled Substances; and Biological Fluid Testing.

27 17. COMPLETION OF PROBATION. Respondent shall comply with all financial
28 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the

1 completion of probation. Upon successful completion of probation, Respondent's certificate shall
2 be fully restored.

3 18. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
4 of probation is a violation of probation. If Respondent violates probation in any respect, the
5 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
6 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
7 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
8 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
9 the matter is final.

10 19. LICENSE SURRENDER. Following the effective date of this Decision, if
11 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
12 the terms and conditions of probation, Respondent may request to surrender his or her license.
13 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
14 determining whether or not to grant the request, or to take any other action deemed appropriate
15 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
16 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
17 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
18 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
19 application shall be treated as a petition for reinstatement of a revoked certificate.

20 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
21 with probation monitoring each and every year of probation, as designated by the Board, which
22 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
23 California and delivered to the Board or its designee no later than January 31 of each calendar
24 year.

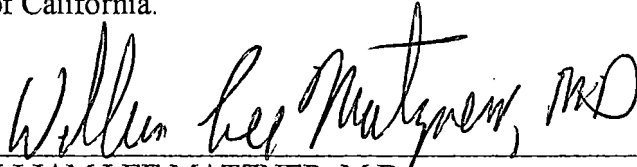
25 ACCEPTANCE

26 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
27 discussed it with my attorney, Gregory D. Werre. I understand the stipulation and the effect it

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1 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
2 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
3 Decision and Order of the Medical Board of California.

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5 DATED: 7-24-18
6 July 24, 2018


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WILLIAM LEE MATZNER, M.D.
Respondent

I have read and fully discussed with Respondent William Lee Matzner, M.D. the terms and
conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
I approve its form and content.

DATED: 7/26/18


GREGORY D. WERRE
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
submitted for consideration by the Medical Board of California.

Dated: 7/31/18

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ROBERT MCKIM BELL
Supervising Deputy Attorney General



VLADIMIR SHALKEVICH
Deputy Attorney General
Attorneys for Complainant

Exhibit A

Accusation No. 800-2015-012071

1 XAVIER BECERRA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 VLADIMIR SHALKEVICH
Deputy Attorney General
4 State Bar No. 173955
California Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6538
Facsimile: (213) 897-9395
7 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO January 3, 2018
BY: [Signature] ANALYST

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2015-012071

13 **William Lee Matzner, M.D.**
14 **P.O. Box 941570**
15 **Simi Valley, CA 93094**

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 43053,**

Respondent.

18 Complainant alleges:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
21 capacity as the Executive Director of the Medical Board of California, Department of Consumer
22 Affairs (Board).

23 2. On or about August 25, 1986, the Medical Board issued Physician's and Surgeon's
24 Certificate Number A 43053 to William Lee Matzner, M.D. (Respondent). The Physician's and
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein
26 and will expire on December 31, 2019, unless renewed.

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JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.

5. Section 2234 of the Code, states:

"The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

"(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.

"(b) Gross negligence.

"(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions. An initial negligent act or omission followed by a separate and distinct departure from the applicable standard of care shall constitute repeated negligent acts.

"(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

"(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.

"(d) Incompetence.

"(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

"(f) Any action or conduct which would have warranted the denial of a certificate.

1 “(g) The practice of medicine from this state into another state or country without meeting
2 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
3 apply to this subdivision. This subdivision shall become operative upon the implementation of
4 the proposed registration program described in Section 2052.5.

5 “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
6 participate in an interview by the board. This subdivision shall only apply to a certificate holder
7 who is the subject of an investigation by the board.”

8 6. Section 2236 of the Code states:

9 “(a) The conviction of any offense substantially related to the qualifications, functions, or
10 duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this
11 chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive
12 evidence only of the fact that the conviction occurred.

13 “(b) The district attorney, city attorney, or other prosecuting agency shall notify the
14 Medical Board of the pendency of an action against a licensee charging a felony or misdemeanor
15 immediately upon obtaining information that the defendant is a licensee. The notice shall identify
16 the licensee and describe the crimes charged and the facts alleged. The prosecuting agency shall
17 also notify the clerk of the court in which the action is pending that the defendant is a licensee,
18 and the clerk shall record prominently in the file that the defendant holds a license as a physician
19 and surgeon.

20 “(c) The clerk of the court in which a licensee is convicted of a crime shall, within 48 hours
21 after the conviction, transmit a certified copy of the record of conviction to the board. The
22 division may inquire into the circumstances surrounding the commission of a crime in order to fix
23 the degree of discipline or to determine if the conviction is of an offense substantially related to
24 the qualifications, functions, or duties of a physician and surgeon.

25 “(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to
26 be a conviction within the meaning of this section and Section 2236.1. The record of conviction
27 shall be conclusive evidence of the fact that the conviction occurred.”
28

7. Section 2242 states, in pertinent part: “(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022 without an appropriate prior examination and a medical indication, constitutes unprofessional conduct.”

8. Section 2261 states: "Knowingly making or signing any certificate or other document directly or indirectly related to the practice of medicine or podiatry which falsely represents the existence or nonexistence of a state of facts, constitutes unprofessional conduct."

FIRST CAUSE FOR DISCIPLINE

(Conviction of a Crime)

9. Respondent is subject to disciplinary action under section 2236 in that he was convicted of a crime that is substantially related to the qualifications, functions and duties of a physician and surgeon. The circumstances are as follows:

10. On or about June 21, 2017, in the Ventura County Superior Court case number 2015024786, entitled *People v. William Lee Matzner*, Respondent was convicted, upon a plea of guilty to Count 1 of a Felony Complaint pending against him, which alleged: "On or about April 12, 2013 through August 07, 2014, in the above named Judicial District, the crime of SALE/TRANSPORTATION/OFFER TO SELL CONTROLLED SUBSTANCE, in violation of Health and Safety Code 11352(a), a Felony, was committed by WILLIAM LEE MATZNER, who did unlawfully transport, import into the State of California, sell, furnish, administer, and give away, and offer to transport, import into the State of California, sell, furnish, administer, and give away, and attempt to import into the State of California and transport a controlled substance, to wit: oxycodone."

11. On or about September 20, 2017, Respondent was fined and sentenced to serve 270 days in Ventura County jail, followed by 60 months' probation. Respondent was ordered to complete 250 hours of community service and to pay restitution.

12. The circumstances of the crime are as follows:

a. Patient A, a female, was 38 years old when she died of a medication overdose on or about August 11, 2014. She was Respondent's patient starting approximately on August 2, 2012, and was last seen by Respondent on August 7,

1 2014. During this period, Respondent regularly prescribed numerous controlled
2 substances to this patient, in excessive doses, and in dangerous combinations.
3 The controlled substances prescribed included but were not limited to oxycodone
4 in combination with Xanax and Lunesta, as well as diazepam (Valium) and
5 zolpidem (Ambien.) These numerous prescriptions were written by Respondent
6 without an appropriate prior examination or medical indication. The above-
7 referenced prescribing continued despite repeated inquiries from pharmacists
8 questioning the dangerous combinations and amounts of medications prescribed
9 by Respondent to Patient A.

10 b. Patient B, a female, was 40 years old when she first saw Respondent on or
11 about December 10, 2010. Her last known visit with Respondent was on or about
12 May 25, 2015. During this period, Respondent regularly prescribed numerous
13 controlled substances to this patient, in excessive doses, and in dangerous
14 combinations. The controlled substances prescribed to this patient included but
15 were not limited to morphine sulfate, carisoprodol (Soma) and temazepam. These
16 numerous prescriptions were written by Respondent without an appropriate prior
17 examination or medical indication. The above-referenced prescribing continued
18 despite numerous early refills of medication, which should have raised concerns
19 about patient's addiction or diversion of medication.

20 c. Patient C, a male, was 26 years old when he first saw Respondent on or about
21 December 9, 2013. His last known visit with Respondent was on or about May
22 18, 2015. During this period, Respondent regularly prescribed numerous
23 controlled substances to this patient, in excessive doses, and in dangerous
24 combinations. The controlled substances that were prescribed to this patient in
25 combination included, but were not limited to, oxycodone, hydrocodone,
26 carisoprodol (Soma), alprazolam, morphine sulfate and temazepam.

27 d. Patient D, a male, was 52 years old when he first saw Respondent on or about
28 January 24, 2013. His last known visit with Respondent was on or about July 1,

1 2014. During this period, Respondent regularly prescribed numerous controlled
2 substances to this patient, in excessive doses, and in dangerous combinations.
3 The controlled substances that were prescribed to this patient in combination
4 included, but were not limited to, hydromorphone, oxycodone, fentanyl,
5 zolpidem, temazepam, and alprazolam. The above-referenced prescribing
6 continued despite numerous early refills of medication, which should have raised
7 concerns about patient's addiction or diversion of medication.

8 e. Patient E, was a male undercover police officer who visited Respondent's office
9 on May 7, 2015 and May 20, 2015. The undercover police officer claimed to
10 Respondent that he had pain in his right knee. On May 7, 2015, after a
11 perfunctory medical examination, which did not include any examination of the
12 patient's right knee, Respondent prescribed 60 pills of hydrocodone with
13 acetaminophen (Norco,) a controlled substance, and provided to the patient
14 samples of Vimovo, an anti-inflammatory medication, and Lisinopril, a blood
15 pressure medication. Patient E returned to the Respondent's office on May 20,
16 2015, and underwent a minimal and cursory examination, after which Respondent
17 once again prescribed hydrocodone with acetaminophen (Norco), Vimovo, and
18 Lisinopril. Respondent then, using an electronic medical records program,
19 documented a very thorough physical examination which never took place.

20 **SECOND CAUSE FOR DISCIPLINE**

21 **(Gross Negligence)**

22 13. Respondent is subject to disciplinary action under section 2234, subdivision (b) in
23 that he committed acts of gross negligence in his care and treatment of five patients. The
24 circumstances are as follows:

25 14. The allegations of paragraph 12 are incorporated herein by reference.

26 15. Respondent's manner of prescribing controlled substances to each of the patients, as
27 alleged in paragraph 12, taken together or separately, constitutes an extreme departure from the
28 standard of care.

1 **THIRD CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 16. Respondent is subject to disciplinary action under section 2234, subdivision (c), in
4 that he committed repeated acts of negligence in his care and treatment of five patients. The
5 circumstances are as follows:

6 17. The allegations of paragraph 12 are incorporated herein by reference.

7 18. Respondent's manner of prescribing controlled substances to each of the patients, as
8 alleged in paragraph 12, taken together or separately, constitutes a departure from the standard of
9 care.

10 **FOURTH CAUSE FOR DISCIPLINE**

11 **(Inappropriate Prescribing)**

12 19. Respondent is subject to disciplinary action under section 2242, in that he
13 inappropriately prescribed controlled substances to five patients. The circumstances are as
14 follows:

15 20. The allegations of paragraph 12 are incorporated herein by reference.

16 **FIFTH CAUSE FOR DISCIPLINE**

17 **(Creation of a False Medical Document)**

18 21. Respondent William Lee Matzner, M.D. is subject to disciplinary action under section
19 2261, in that he knowingly created a false medical record. The circumstances are as follows:

20 22. The allegations of paragraph 12 above are incorporated herein by reference.

21
22 **PRAYER**

23 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
24 and that following the hearing, the Medical Board of California issue a decision:


25 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 43053,
26 issued to William Lee Matzner, M.D.;

27 2. Revoking, suspending or denying approval of William Lee Matzner, M.D.'s authority
28 to supervise physician assistants and advanced practice nurses;

1 3. Ordering William Lee Matzner, M.D., if placed on probation, to pay the Board the
2 costs of probation monitoring; and

3 4. Taking such other and further action as deemed necessary and proper.

4
5 DATED: January 3, 2018


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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